

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1931 / 7925

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Amy for America

**A. Full Name (Last, First, Middle Initial)**

ActBlue

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3062782.46

**Transaction ID : 618862E**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 09 / 2019

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**B. Full Name (Last, First, Middle Initial)**

Olson, Mark, , ,

Mailing Address 1725 150th St

City  
Bode

State  
IA

Zip Code  
50519-8521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Farmer

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

**Transaction ID : 622862**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 09 / 2019

Amount of Each Receipt this Period

75.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

Macari, Anne, Marie, ,

Mailing Address 7 Gracie Sq

City  
New York

State  
NY

Zip Code  
10028-8001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not Employed

Occupation  
Not Employed

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

**Transaction ID : 629562**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 18 / 2019

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

**Subtotal Of Receipts This Page (optional)**.....

325.00

**Total This Period (last page this line number only)**.....